Revised 06/08

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12TH, SUITE 1A DES MOINES, IA 50319 Fax: (515)281-4073 www.iowa.gov/ethics



lowa Code section 8.7 requires all gifts and bequests given to any department of the state of lowa or received by the Governor on behalf of the state be reported to the lowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest.

FORM-GB

Gift or Bequest information received by a department or accepted by the Governor on behalf of the state

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DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUEST:

Public Safety			DSI OSI
Name of Department or Office 215 B. 7th Street	Des Moines, IA 50319	%	77
Mailing Address 515-725-6182	City, State, Zlp Code		<u>`</u> cc
Area Code & Telephone No.			

CONTACT PERSON F	'OR RECIPIENT DEPAI	RTMENT OR OFFICE:

Jeanie Flattery

Name

Malling Address (if different from above)

Dattery@dps.stole.ja.us

Email Address

Area Code & Telephone Number (if different from above)

DONOR OF GIFT OR BEQUEST:

Mark Davis				
Name	***************************************		RAMAN Y I	w/destronessessessessessessessessessessessessess
116 Bast Green Street	Brooklyn, IA 52211			
Mailing Address	City, State, Zip Code		December 21, 2018	\$1,000.00
641-990-4311			Dale of Gift or Bequest	Amount/Value*
Area Code & Telephone Number Email Address (optional)	4.444	**************************************	"value is defined as "fair market val receiving department or office. If n	ue" of Item as determined by o value mark "0.00".

Provide a description of the gift or bequest and purpose thereof:

Donation of a TOTAL STATION device to the Iowa State Patrol. A TOTAL STATION is a measuring device used by ISP Technical Collissions Investigative Units officers to facilitate the accurate documentation of traffic collision scenes.

Criteria to use this form:

Receipt of any gift or bequest that is received by any department of the state or received by the Governor on behalf of the state.

Statement of Affirmation:

ı,	Jeanie Flattery	_affirm that the gift or bequest reported above is accurate.	I further affirm that the information concerning the donor and
a	ssessment of the fair market v	value (if applicable) is correct and true to the best of my kno	owledge.

Jeanne Hattey	February 28, 2019	
Signature	Date	